No. W 152943		Due no later than Jun 30, 2018		2	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			LOUISE LUSTER 5557 FAIRFAX LANE BOISE ID 83714			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. LEAVES OF EDEN, LLC (THE) LOUISE LUSTER 5557 FAIRFAX LANE BOISE ID 83714		d.				
				3	3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.								
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER LOUISE F. L		LUSTER	5557 FAIRFAX LANE		BOISE	ID	USA	83714
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Louise Luster			Date: 04/22/2018			
W 152943		Name (type or print): Louise Luster			Title: Manager			
* Electronically provided signatures are accepted as original signatures.								